

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.  
**10677875**  
APPLICANT(S)

FILING DATE  
**10-02-03**

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3						
4	1					
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TOTAL IND.	2					
TOTAL DEP.	7					
TOTAL CLAIMS	9					

	IND		DEP		IND		DEP		IND		DEP	
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